

SELECTION CRITERIA FOR:

OTIS R. BOWEN, M.D. ,

HEROIC RESCUE AWARD

The Otis R. Bowen, M.D. , Heroic Rescue Award is presented to EMS personnel who were actively involved in a rescue operation. Any decision to attempt to rescue a victim from a dangerous environment should be influenced by a thorough knowledge of hazards to the victim, the rescuer, support personnel and the public at large.

To be considered for this award, the candidate(s) must have demonstrated a degree of courage and bravery, while at the same time, showing an understanding of the seriousness of the situation and the risks involved.

APPLI CATION FOR
THE OTIS R. BOWEN, M. D. HEROI C RESCUE AWARD

CANDI DATE

CERT LEVEL	CERT NO.

HOME ADDRESS

CITY	STATE, ZIP

SSN	HOME PHONE

PROVI DER AFFI LI ATE

PROVI DER ADDRESS

CITY	STATE, ZIP

PROVI DER PHONE NO.

APPLI CATION COMPLETED BY

TITLE

PHONE NO.

Please provide the following information using short narratives. Responses should be printed or preferably typed on plain paper, attached to this application form, then mailed to:

Awards Committee
DHS/Fire & Building Safety/EMS
302 W. Washington St. Rm. E241
Indianapolis, IN 46204

Use as many additional sheets as necessary but be certain to provide a response to each request.

1. **List** all agencies involved in the rescue.
2. **Describe** the situation leading to a need for rescue, including the hazards to the victim.
3. **Show** evidence that the candidate(s) understand the seriousness of the situation and exercised appropriate precautions to protect against the risks involved.
4. **Provide** a narrative describing the rescue.
5. **Attach** any newspaper articles relating to the incident.
6. **Attach** any letters of support from representatives of other agencies involved in the rescue.
7. **IT IS IN THE BEST INTEREST OF THE NOMINEE TO NOT SUBMIT A VIDEO OF THE INCIDENT.**